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INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>		Complete if Known			
		Application Number	10/091,236		
		Filing Date	March 4, 2002		
		First Named Inventor	DINGIVAN, Christine		
		Art Unit	1644		
		Examiner Name	GAMBEL, Phillip		
Sheet 1	1	of	1	Attorney Docket Number	VI300US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
PC	C1	"Remicade", Physicians' Desk Reference, 2001; 55 Ed.1084-1088; 310 (ISBN: 1-56363-330-2)	

Examiner Signature	<i>Phillip Gambel</i> 9/15/02	Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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